

**Title:** Mentoring program for medical students: Developing an instrument for evaluation

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**What problems were addressed:** Admission to Brazilian medical schools is very competitive, thus students come from all over the country. To that is added the young age of entrants (Av 18 years), leading to considerable drop out during the first two years. For these reasons it is important to explore retention programs, such as a student Mentoring Program (MP) in medical schools. MPs are not new in medical education, although there is no generally accepted standard. Thus the curriculum designers of a new medical school decided to implement an academic focused MP, conduct a mentor-training course, and validate a questionnaire to evaluate the process.

**What was tried:** A Core Mentor Team (CMT) was nominated by the Undergraduate Dean (May 2018). During fortnightly meetings over eight months the CMT designed a mentoring faculty development program and created an evaluation questionnaire. Workshops (10 hr.) were offered, including understanding communication styles and team work (MBTI<sup>®</sup>) and MP Design. The workshop discussions and reflections led the team to design a MP in three phases. The first was in the two-year basic sciences, to: 1) help students understand and deal with university rules and context, and student support systems; 2) apply and interpret their MBTI<sup>®</sup> profile; 3) develop oral, writing and artistic expression; 4) guide students' curriculum vitae construction; and 5) clarify medical course learning objectives and encourage student engagement. The second, in the two-year Clinical Clerkships, focused on: 1) Personal Development Plans supervised by the mentor, helping students recognize their strengths and weakness and creating a strategy for achieving their goals; and 2) groups focused on professionalism, conducted to ensure student success. The third, during Internship is designed to help students: 1) deal with the transference and countertransference aspects of the doctor-patient relationship, through participation in Ballint Groups; and 2) understand career and labor medical market forces.

To follow and assess the MP, two questionnaires from the Institute for Clinical and Translational Research, University of Wisconsin-Madison, were translated and adapted to an undergraduate MP setting and validated. The flow for reliability and validity of the Mentoring Competency Assessment Portuguese (MCA-P) version was: 1) Adaptation and content validity. 2) Face validity. 3) Pilot study with two mentors and 21% (N = 48) of student enrolled in the MP. 4) Retest with 25% (N = 48) of the student sample (N = 177). 5) Reliability and validity analysis assessed with exploratory factor analysis, internal consistency of each domain using the Cronbach alpha, intra class consistency, and test-retest reliability with the Spearman test. All analyses indicated high consistency and moderate to high strength correlation with p value < 0.001.

**What lessons were learned:** MP implementation is a long-term process requiring continuous collaboration from all stakeholders. We found mid-way that having a validated mentoring assessment instrument would facilitate common understanding of MP objectives. A robust and validated instrument for mentoring competency skills can be adapted and validated in a transcultural setting. This instrument will be useful to design and monitor MP effectiveness, as well as provide an important guide for future mentor training programs.

**Reference:**

Fleming *et al.* The Mentoring Competency Assessment: Validation of a New Instrument to Evaluate Skills of Research Mentors. *Acad Med.* 2013 July; 88(7): 1002–1008.  
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